STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Bart's Bridge PAC 817 Ninth Avenue, Second Floor ADDRESS (number and street) PO Box 1021 (Check if address is changed) Menominee 49858 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS bridgepac@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00428045 FEC IDENTIFICATION NUMBER > 3. × IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Ann Barstow Type or Print Name of Treasurer Ann Barstow [Electronically Filed] 01 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

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